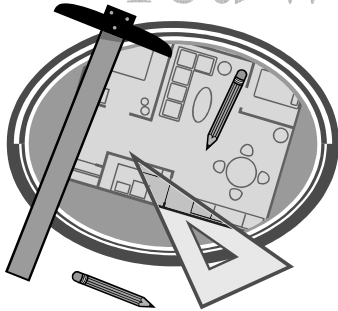




# You want to finish your basement...



**Applicant must submit County or Town Zoning Permit with this application.**

## RESIDENTIAL BASEMENT CHECKLIST And Permit Application

- ☐ Yes Does your basement have an existing window or door that complies  
☐ No with the County's basement renovation package?

If your basement **does not** currently have one of the emergency egress options then you must provide one. (See page 2 of 9 of the attached *Typical Finished Basement Details*)  
**Cutting openings in existing basement walls is outside the scope of these details. Therefore, a plan submission is required for the new openings only, engineered design may be required.** All other conditions of the finished basement may be taken from these details.

- ☐ Yes Property is located on private well and drain field?  
☐ No If your property is located on private well and drain field and your renovation includes an additional bedroom, you must obtain written approval from the Health Department prior to your permit being issued.

***The following checklist must be complete in its entirety and is considered part of the application.***

- ☐ Complete the application form (attached)
- ☐ Landowner Affidavit if landowner is performing the work him/herself -- (Affidavit is part of application); or
- ☐ Signature of Legal Landowner, or agent authorization letter -- (This letter authorizes homeowner or contractor to apply on behalf of one another. The Contractor's letter authorizing the homeowner to pull permit on his behalf must be on Contractor's letterhead to include the current license number.)
- ☐ Fees for Zoning and Building collected at the time of submission of the application.

► \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant/Contractor's Signature

► \_\_\_\_\_ Date: \_\_\_\_\_  
Permit Technician Initials indicating each item complete



## Culpeper County RESIDENTIAL BASEMENT PACKAGE PERMIT APPLICATION

**Applicant must submit County or Town Zoning Permit with this application.**

Application should reflect actual work being performed.  
Application must be filled out completely - if not, it will be returned.

▶ _____	(_____) _____	(_____) _____	(_____) _____
Owner	Mailing Address	Zip	Phone
▶ _____	(_____) _____	(_____) _____	(_____) _____
Contractor	Mailing Address	Zip	Phone
(_____) _____	(_____) _____	(_____) _____	(_____) _____
Fax Phone No.	Cell phone	Email Address	\$ _____
Contractor License No.	Class	Exp. Date	Contract Amount

▶ • **Contractor License Verified \_\_\_\_\_ (Permit Technician Initials)**

Health Permit No.: \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_

Special Conditions: \_\_\_\_\_

- ▶ Type of water supply:      • Public      • Private (well)
- ▶ Type of sewage disposal:      • Public      • Private (septic tank)

**IMPORTANT: It is the responsibility of the person issued this permit to insure adherence to all zoning and building regulations.**

Signature of  
▶ Owner or Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_  
Owner/Agent - Print Name \_\_\_\_\_

Approved by  
▶ Zoning Administrator \_\_\_\_\_ Date \_\_\_\_\_

### CODE USED

- |  |                  |                  |
|--|------------------|------------------|
| • IRC (International Residential Code) | ▶ • 2000 Edition | ▶ • 2003 Edition |
| • IPC (International Plumbing Code)    | ▶ • 2000 Edition | ▶ • 2003 Edition |
| • IMC (International Mechanical Code)  | ▶ • 2000 Edition | ▶ • 2003 Edition |
| • NEC (National Electrical Code)       | ▶ • 1999 Edition | ▶ • 2002 Edition |

▶ \_\_\_\_\_ (Permit Technician Initials, indicating correct year of codes)

**SCOPE OF WORK** • Basement Remodeling

**Estimated Value of Completed Work** \$ \_\_\_\_\_

**Estimated Time of Construction** \_\_\_\_\_

**USE GROUP**

• Residential (R- )

\_\_\_\_\_**TYPE**

**OF CONSTRUCTION**

1A \_\_\_\_\_ 1B \_\_\_\_\_ 2A \_\_\_\_\_ 2B \_\_\_\_\_ 3A \_\_\_\_\_ 3B \_\_\_\_\_ 4 \_\_\_\_\_ 5A \_\_\_\_\_ 5B \_\_\_\_\_ Modular \_\_\_\_\_

**TYPE OF FOUNDATION**

• Masonry • Formed Cement • Precast Concrete  
• Pressure Treated Wood • Other - Specify \_\_\_\_\_

**TYPE OF WALL CONSTRUCTION**

• Wood Frame • Masonry Bearing • Structural Steel  
• Reinforced Concrete • Other - Specify \_\_\_\_\_

**TYPE OF HEATING**

• Gas • Oil • Electric Baseboard • Electric Furnace • Heat Pump • Other

**TYPE OF MECHANICAL**

• Air Conditioning • Elevator • Gas Line • Other \_\_\_\_\_

**ADMINISTRATIVE USE ONLY**

Permit Fee (\$.15 / sq.ft. or a minimum of \$25.00)	**	_____
Setback Fee	**	_____
Site Work Fee	**	_____
Agreement In Lieu of Plan	**	_____
Pre-work	**	_____
Change of Use Fee	**	_____
Trade(s) Fees	**	_____
Copies	# _____	_____
<b>Subtotal:</b>		<b>\$ _____</b>
1.75% Levy per USBC		_____
Zoning Fee	**	_____
<b>Total:</b>		<b>\$ _____</b>

LIEN AGENT \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone and fax \_\_\_\_\_ None Designated \_\_\_\_\_



- 
1. Please show measurements, indicate total square footage of the finished area \_\_\_\_\_ sq. ft.
  2. Please show dimensions of doors and windows (see requirements on the attached *Typical Finished Basement Details*, page 2 of 9), in addition to identifying each room and its planned use.

**NOTE: THIS DOCUMENT CONTAINS IMPORTANT INFORMATION CONCERNING THE VIRGINIA CONTRACTOR'S LICENSING LAW. PLEASE READ CAREFULLY BEFORE SIGNING**

**OWNER/CONTRACTOR - AFFIDAVIT**

I \_\_\_\_\_ of (address) \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at \_\_\_\_\_ in the County of Culpeper and that I have applied for a building permit to erect a structure on said land or repair or improve an existing structure on said land.

***I affirm that I am aware of the provisions of Title 54.1, Chapter 11, Code of Virginia that requires a contractor to be properly licensed before he may bid or undertake contracting work of \$1,000 or more. I further certify that I am familiar with the responsibilities of an awarding authority specified in Section 54.1111 of the Code which prohibits any awarding authority from issuing permits or allowing the issuance of such permits to any contractor not properly licensed under the provisions of the Code, and that to do so would constitute the commission of a misdemeanor.***

I affirm that I understand that a contractor must be licensed as a Class C contractor for any job of \$1,000 or more, but less than \$7,500; that a contractor must be licensed as a Class B contractor for any job of \$7,500 or more but less than \$70,000; and that a contractor must be licensed as a Class A contractor for any job of \$70,000 or more.

I affirm that I am duly licensed under the terms of Title 54.1, Chapter 11, Code of Virginia to carry out or superintend this work; OR I am not subject to licensure as a contractor, subcontractor, or owner-developer pursuant to such title. I affirm that I have paid in full any license fees required by any county, city, or town so as to qualify me to bid upon or contract for the work for which this permit has been applied.

This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

---

Signature of Contractor/Authorized Agent

Print Name

Date

---

Signature of Owner (if owner/builder)

Print Name

Date

This page is required only if you will be paying for Trade/Sub-Contractor permits.

**ELECTRICAL PERMIT**

Name of Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone: \_\_\_\_\_

Email address \_\_\_\_\_ Cell Ph: \_\_\_\_\_

City State Zip \_\_\_\_\_ Fax: \_\_\_\_\_

State Contractor's License No.: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Tradesman Certification No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Estimated Value of Work: \$** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Print:** \_\_\_\_\_

**MECHANICAL PERMIT**

Name of Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone: \_\_\_\_\_

Email address \_\_\_\_\_ Cell Ph: \_\_\_\_\_

City State Zip \_\_\_\_\_ Fax: \_\_\_\_\_

State Contractor's License No.: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Tradesman Certification No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Estimated Value of Work: \$** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Inside Gas Lines: \_\_\_\_\_ Outside Gas Lines: \_\_\_\_\_ **Print:** \_\_\_\_\_

**PLUMBING PERMIT**

Name of Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Ph: \_\_\_\_\_

City State Zip \_\_\_\_\_ Fax: \_\_\_\_\_

State Contractor's License No.: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Tradesman Certification No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Estimated Value of Work: \$** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Inside Gas Lines: \_\_\_\_\_ Outside Gas Lines: \_\_\_\_\_ **Print:** \_\_\_\_\_